PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1	995, no person are required to	respond to a collection	Complet	e if Known			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		00mptete ii 100 0					
		Application Training		uary 24, 2004			
			Filling Date				
		First Named Inve	11101				
		Examiner Name					
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1624					
TOTAL AMOUNT OF PAYMENT	(\$) 1,120.00	Attorney Docket No. 5647		76DIV2(52780)			
TOTAL AMOUNT OF THE PROPERTY O							
METHOD OF PAYMENT (check all that apply) Other (please identify):							
Check Credit Card Money Order							
X Deposit Account Deposit Account	Number: 04-1105 Deposit Ad	COGIN FROM			Dougo Li		
5. the shape identified deposit account the Director is hereby authorized to: (check all that apply)							
The above-identified deposit account, and the filling fee above indicated below, except for the filling fee above indicated below. Charge fee(s) indicated below.							
Charge any additional fee(s) or underpayment of X Credit any overpayments							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
THE STANDON AND EVAMINATION FEES							
1. BASIC FILING, SEARCH, AND E	ILING FEES SI	EARCH FEES	EXAMINAT				
	Small Entity	Small Entity (\$) Fee (\$)	<u>S</u> Fee (\$)	mall Entity Fee (\$)	Fees Pa	aid (\$)	
Application Type Fee (1.50		200	100			
Utility 300	100		130	65			
Design 200		4.50	160	80			
Plant 200			600	300			
Reissue 300			000	0			
Provisional 200	100	0 0	U	v		Small Entity	
2. EXCESS CLAIM FEES Fee (\$)							
Fee Description 50					50	25	
Each claim over 20 (including Reissues) 200				200	100		
Each independent claim over 3 (including Reissues) 200 180						180	
Multiple dependent claims							
Total Claims Extra Claims	100 (4)	0.0.0	Fee (<u>\$)</u>	Fee Paid (\$)	
- 20 = HP = highest numer of total claims paid for	or, if greater than 20.					_	
		e Paid (\$)					
Indep. Claims Extra Claims	x =						
HP = highest numer of independent claim	s paid for, if greater than 3.					_	
				l coguence of	computer		
3. APPLICATION SIZE FEE If the specification and drawings listings under 37 CFR 1.52(e)	exceed 100 sheets of par	er (excluding elec	for small enti	ty) for each a	dditional 50	0	
				37			
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
rotal sheets (50 (round up to a whole number) x =							
Fees Paid (\$)						Paid (\$)	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 330.00							
Other (e.g., late filing surcharge): 1231 Extension for films that the filing surcharge 1801 Request for continued examination (RCE) (see 37 790.00							
SUBMITTED BY					(047) 40	00 4444	
Signature C.M. (Attorney/Agent) 38,256 Telephone (017) 435-			9-4444				
Date April 3, 200							
		(Attorney/Agent)		Date	April 3	, 2006	

	in the U.S. Dectal Service a
is at at this pages (alo	ng with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service a
I hereby certify that this paper (all	ng with any paper reterred to as being attached. 26 422 US, on the date shown below in an envelope addressed to: BO BOY 1450/MEXAND/ia/MA 223/13/1450. /
Express Mail, Label No. EV 750 0	126 422 US, on the date shown below in an envelope addressed to the date shown below in an envelope addressed to the date of t
MS RCE, Commissioner for Pater	Marketh NINIII
	Signature: (WWW WWW (Elisabeth Dunkle)
Dated: April 3, 2006	Signature. Correction of the second of the s